PART B - FEE(S) TRANSMITTAL

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CONFIRMATION NO

ATTORNEY DOCKET NO

EIDST NAMED INVESTOR 10/722 487 11/28/2003 Tadashi Kojima 24603811929 110/ TITLE OF INVENTION: CONTENT MANAGEMENT METHOD, RECORDING AND/OR REPRODUCING APPARATUS, AND RECORDING MEDIUM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(8) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	04/14/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
HOANG, DANIEL L		2436	726-031000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1363). ☐ Change of correspondence address (or Change of Correspondence Address Tom PTONSPI 22) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form Tom PTONSPI 22). The Conference of the Correspondence Address of the Conference of the C			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		era 2 McClell	McClelland, Maier	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11 Completion of this form is NOT a substitute for filling an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

KABUSHIKI KAISHA TOSHIBA Tokyo, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 📓 Corporation or other private group entity 🖵 Government

4a. The following fee(s) are submitted:

Issue Fee

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APPLICATION NO.

Publication Fee (No small entity discount permitted) Advance Order - # of Copies _ - 3 -

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The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0030 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date Authorized Signature __ Registration No. 28,4 ames D. Hamilton Typed or printed name _

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